

03-02-06

AP/ITW

PTO/SB/21 (04-04)

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| | | | |
|---|----------------------|------------------------|------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/601,269 | |
| | Filing Date | June 20, 2003 | |
| | First Named Inventor | Kia et al. | |
| | Art Unit | 1774 | |
| | Examiner Name | Merrick L. Dixon | |
| Total Number of Pages in This Submission | | Attorney Docket Number | H-203315(8540R-000001) |

| ENCLOSURES (check all that apply) | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimers (2) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return receipt postcard |
| | | Remarks The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 07-0960. A duplicate copy of this sheet is enclosed. |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|----------------------------------|---------------|--------------------------------|
| Firm or Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name | Anna M. Budde/Mark A. Frentrop |
| | | Reg. No. | 35,085/41,026 |
| Signature | Mark A Frentrop | | |
| Date | 2/28/2006 | | |

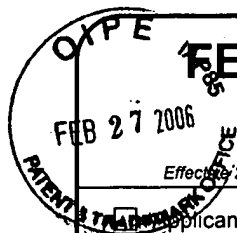
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|---|------------------|------------------------|-------------------------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. | | | |
| Typed or printed name | Mark A. Frentrop | Express Mail Label No. | EV 717 343 851 US (2/28/2006) |
| Signature | Mark A Frentrop | Date | 2/28/2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL for FY 2006

Effective 2/8/2006. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 260

Complete if Known

Application Number 10/601,269
Filing Date June 20, 2003
First Named Inventor Kia et al.
Examiner Name Merrick L. Dixon
Art Unit 1774
Attorney Docket No. H-203315 (8540R-000001)

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 07-0960

Deposit Account Name General Motors Corporation

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|------------------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1011 | 300 | 2011 | 150 | Utility filing fee | |
| 1012 | 200 | 2012 | 100 | Design filing fee | |
| 1013 | 200 | 2013 | 100 | Plant filing fee | |
| 1014 | 300 | 2014 | 150 | Reissue filing fee | |
| 1005 | 200 | 2005 | 100 | Provisional filing fee | |

SUBTOTAL (1)

(\$0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| | | Extra Claims | | Fee from below | Fee Paid |
|--------------------|--------|--------------|---|----------------|----------|
| Total Claims | -20 ** | = 0 | X | = 0 | |
| Independent Claims | -3 ** | = 0 | X | = 0 | |
| Multiple Dependent | | | | = 0 | |

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 | |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 | |
| 1203 | 360 | 2203 | 180 | Multiple dependent claim, if not paid | |
| 1204 | 200 | 2204 | 100 | ** Reissue independent claims over original patent | |
| 1205 | 50 | 2205 | 25 | ** Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2)

(\$0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|--------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 1053 | 130 | 1053 | 130 | Non-English specification | |
| 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination | |
| 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | |
| 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action | |
| 1251 | 120 | 2251 | 60 | Extension for reply within first month | |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month | |
| 1253 | 1020 | 2253 | 510 | Extension for reply within third month | |
| 1254 | 1,590 | 2254 | 795 | Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 | 1080 | Extension for reply within fifth month | |
| 1401 | 500 | 2401 | 250 | Notice of Appeal | |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | |
| 1403 | 1000 | 2403 | 500 | Request for oral hearing | |
| 1452 | 500 | 2452 | 250 | Petition to revive - unavoidable | |
| 1453 | 1500 | 2453 | 750 | Petition to revive - unintentional | |
| 1462 | 400 | 1462 | 400 | Petition fee under 37 CFR 1.17(f) | |
| 1463 | 200 | 1463 | 200 | Petition fee under 37 CFR 1.17(g) | |
| 1464 | 130 | 1464 | 130 | Petition fee under 37 CFR 1.17(h) | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | |
| 1809 | 790 | 2809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 1801 | 790 | 2801 | 395 | Request for Continued Examination (RCE) | |

Other fee (specify) Terminal Disclaimers (2)

260

*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$260)

4. SEARCH/EXAMINATION FEES

| | | | | | |
|------|-----|------|-----|-------------------------|--|
| 1111 | 500 | 2111 | 250 | Utility Search Fee | |
| 1112 | 100 | 2112 | 50 | Design Search Fee | |
| 1113 | 300 | 2113 | 150 | Plant Search Fee | |
| 1114 | 500 | 2114 | 250 | Reissue Search Fee | |
| 1311 | 200 | 2311 | 100 | Utility Examination Fee | |
| 1312 | 130 | 2312 | 65 | Design Examination Fee | |
| 1313 | 160 | 2313 | 80 | Plant Examination Fee | |
| 1314 | 600 | 2314 | 300 | Reissue Examination Fee | |

SUBTOTAL (4)

(\$0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Michael D. Wiggins Registration No. (Attorney/Agent) 34,754 Telephone (248) 641-1600
Signature [Signature] Date 2/28/06

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